12/5/00 12/6/00 2:00 12/6/00 100. oftenom

PERMIT

SEWAGE DISPOSAL SYSTEM

HOWARD COUNTY HEALTH DEPARTMENT

BUREAU OF ENVIRONMENTAL HEALTH 410-313-2640 ISSUE DATE 11/21/2000

INDEXED

APPROVAL DATE 12/6/00

Arnold's Backhoe & Septic Service, Inc. IS P	ERMITTED TO INSTALL	ALTER <u> </u>
ADDRESS P.O. Box 15. Woodbine, MD 21797	PHONE 410-	795-7873
SUBDIVISION Trusted Information LOT NUMBER 2 ADDRE	SS 3100 Roxbury Mill	Road
PROPERTY OWNER Steve & Brenda Walker PROPERTY OWNER'S	ADDRESS Same	
SEPTIC TANK CAPACITY 1000 GALLONS CONNECTED IN SER	LIES TO EXISTING	
PUMP CHAMBER CAPACITY GALLONS BUILDING PERMI	TSIGNED	
NUMBER OF BEDROOMS6 AND RETUR	•	
SQUARE FEET PER BEDROOM 421-04 BOD 1475		•
INEAR FEET OF TRENCH REQUIRED ///		
		- · · · ·
RENCHES: Trenches to be 2 feet wide. Inlet 5 ± feet below original gra		· · · · · · · · · · · · · · · · · · ·
70 ± feet below original grade. 5 feet of stone below distribution OCATION:	n box.	
REPAIR - PURPOSE - In support of building permit #B00127102	•	
Call for inspection when ground is opened so sanit	arian can recommend re	epair. 11/29
141 00 SPECS ISSUED FOR TRENCH ON OTHER	SIDE OF TREES	FROM
EX. TRENCH (MIR)		
PLANS APPROVED	DATE	
PERMIT VOID AFTER 2 YEARS		
NOTE: CONTRACTOR RESPONSIBLE FOR SCHEDULING A PRE-CONSTRUCTION INSPECTION FO	OR ALL INSTALLATIONS	
NOTE: TOP OF SEPTIC TANKS ARE TO BE NO DEEPER THAN 3.0 FEET BELOW FINISH GRADE	* * * * * * * * * * * * * * * * * * *	
NOTE: WATERTIGHT SEPTIC TANKS REQUIRED	. •	,
NOTE: CLEANOUT REQUIRED EVERY 70 FEET OF SEWER LINE AND/OR AT 90° SWEEPS IN LINE ARE NOT ACCEPTABLE	S FROM HOUSE TO DRAIN FIELD	os, 90° ELBOWS
NOTE: ALL PARTS OF SEPTIC SYSTEMS (I.E. TANK, DISTRIBUTION BOX, DRAINFIELDS) TO BE OTHERWISE SPECIFICALLY AUTHORIZED	100 FEET FROM ANY WATER WE	ELL UNLESS
NOTE: NO ABSORPTION TRENCH TO EXCEED 100 FEET IN LENGTH UNLESS SPECIFICALLY AU	THORIZED	
NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 35/40 PV	C OR ABS	
NOTE: MANHOLE RISERS REQUIRED ON ALL SEPTIC TANKS AND PUMP CHAMBERS		
NOTE: DISTRIBUTION BOXES MUST HAVE BAFFLES		term of the second
NOTE: IF PUMPED SEPTIC SYSTEM REQUIRED, (1) SEPTIC PUMP DETAIL TO BE PROVIDED BY PERMIT (2) PUMP PERFORMANCE TEST IS NECESSARY PRIOR TO HEALTH DEPARTMENT	INSTALLER PRIOR TO ISSUANCE NT APPROVAL OF SEPTIC PERMI	OF SEPTIC

NEITHER THE HOWARD COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPONSIBLE FOR THE SUCCESSFUL OPERATION OF ANY SYSTEM

PERMITTEE RESPONSIBLE FOR OBTAINING FINAL APPROVAL ON THIS PERMIT

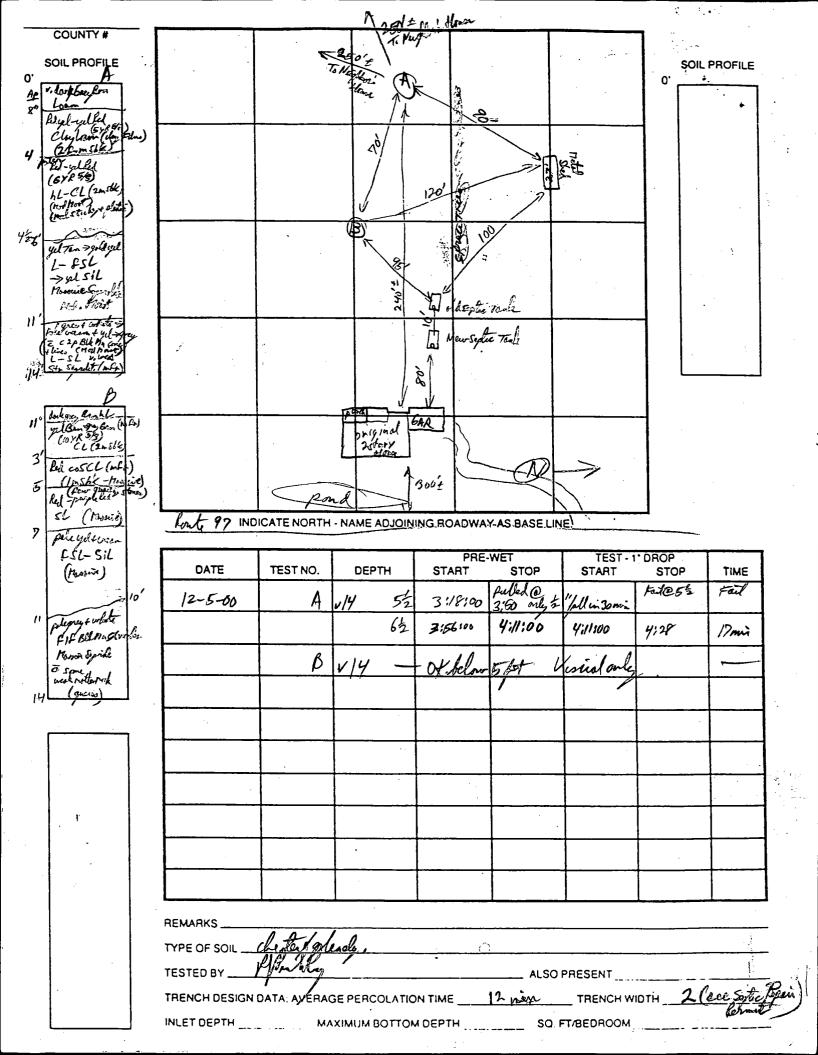
CALL 410-313-2640 FOR INSPECTION OF SEPTIC SYSTEM

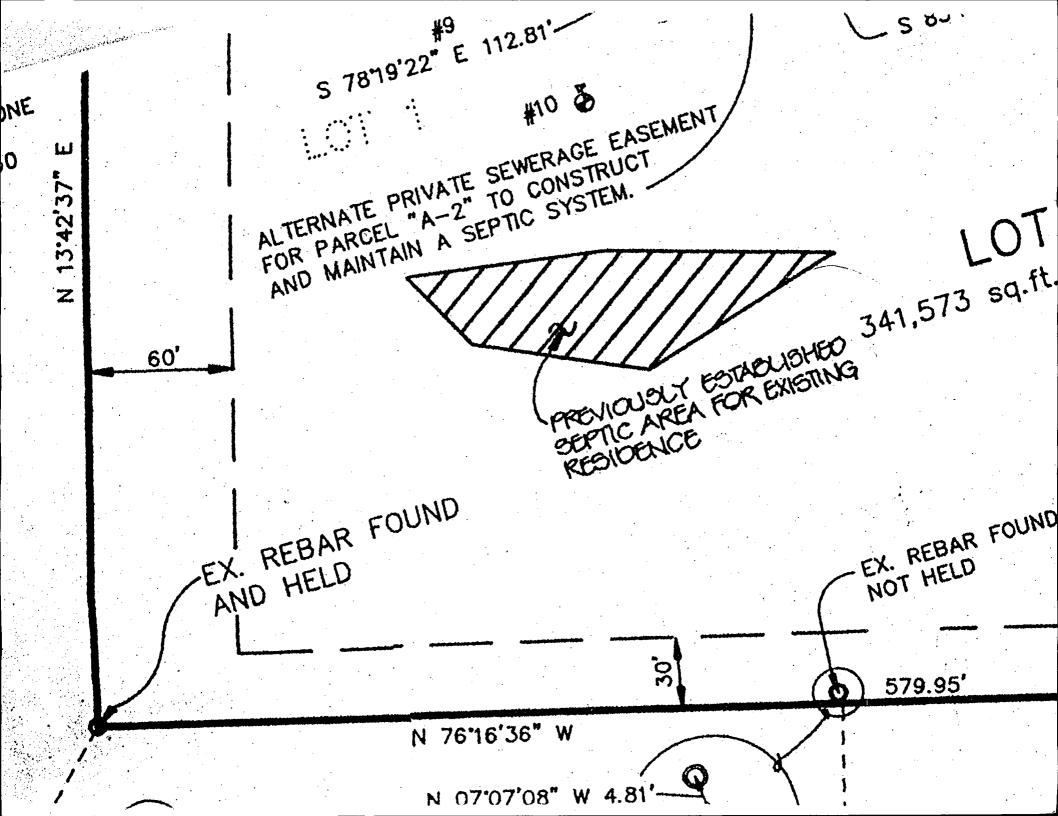
	TRENCH DATA
	TRENCH WIDTH2'
	TRENCH INLET DEPTH
del. §	TRENCH BOTTOM DEPTH
Tooktole y	DEPTH OF STONE
The state of the s	NUMBER OF TRENCHES one New
	TOTAL TRENCH LENGTH 100/Alexa) 220 Tal
BUILDING PREMISICALE .	ABSORBENT AREA 1100 40 Pt Total
and returned if of all	DISTRIBUTION BOX LEVEL yes
AND RETURNED IS OF STATE	BAFFLE IN DISTRIBUTION BOX
· · · · · · · · · · · · · · · · · · ·	
Declast.	SEPTIC TANK DATA
B Cold ST.	old lang och-
1- New 1000gal ST.	SEPTIC TANK 100 Bask GALLONS
1	MANHOLE RISER 26 Mich on Roll
18"	6 INCH INSPECTION PORT yer Both
[64R]	PUMP CHAMBER DATA
1 tlas	PUMP CHAMBER NA.
	MANHOLE RISER
300+	ALARM
	PUMP PERFORMANCE TEST
food 1	FOWER PERFORMANCE TEST
PRE-CONSTRUCTION INSPECTION:	
INSPECTION COMMENTS: New Soft Tank and counting 5ch to 50	seng virtulial. Did two percelets
To verily levied SAA, ledeaunt Trends to be installed Francis	- HIP 12/5/00 Mid Served Tank
Needs with Tipthess Tet. AN 19/6/00 New Trend Fortables, grand file	of oxte hind tound the Cover all
work, S.T. 's OK (Il's + hours) Dist Box OK. APPRAGOO	- jone a
- M A FA	
INSPECTOR CALL WILL	12/6/00

APPLICATION

•			
	PERCOLATION TESTING		A Repair
		•	P 514663-8
	Exposed System Systems a & Born Hosse & fewer AND 21043 Support New Build to Sperise System ares)	ò ~	F 077 66 3-25
HOWARD COUNTY HEALTH DEPARTMENT	Was E amos	John DISTRICT_	
BUREAU OF ENVIRONMENTAL HEALTH	a barn nosse from	a Abote	
3525-H EŁLICOTT MILLS DRIVE/ELLICOTT CITY, MARYLA TELEPHONE: 313-2840	AND 21043 Support New Build	DATE_	
	(slevise Sate area)		• •
O: THE COUNTY HEALTH OFFICER	(4)		
ELLICOTT CITY, MARYLAND			
LUSOS DA VICE DE SE	- 1		
I HEREBY APPLY FOR THE NECESSARY TEST PRIOR TO	1	R RECONSTRUCT) A SEWA	SE DISPOSAL SYSTEM.
ROPERTY OWNER Trusted Informati	10h (Steve + Brande hal	(ka)	
ADDRESS 3100 Loxbury Mill Ro	(formerly 3060 PHONE)	Value C P	·
GENT OR PROSPECTIVE BUYER			
GENT OR PROSPECTIVE BOTER			
ADDRESS	PHONE		
ROPERTY LOCATION:		•	· .
SUBDIVISION Trusted tubornation	a Systems LOTHO.		
SUBUIVISION POLITICION SE SALES SE	101 NO		
ROAD AND DESCRIPTION W/ Forte 98 just	5/ New Post office.		
14 2-11			
TAX MAP			
SIZE OF LOT			
SIZE OF LOT	TYPE BLDG(\$	SINGLE FAMILY OWELLING	OR COMMERCIAL)
THE SYSTEM INSTALLED UNDER THIS APPLICATION IS	ACCEPTABLE ONLY UNTIL PUBLIC FACILITIE	S BECOME AVAILABLE.	FULLY UNDERSTAND THE
FEE CONNECTED WITH THE FILING OF THIS PERC	TEST ADDITION IS NON DESIMINABLE I	INDER ANY CIRCUMSTAN	SER I ALEO AGREE TO
THE FIGHT OF THIS PERC	TEST AFFECATION IS NON-REPURDABLE C	NUER ANT CIRCOMSTANC	JES. I ALSO AGREE TO
COMPLY WITH ALL M.O.S.H.A. REQUIREMENTS IN TESTI	ING THIS LOT.		
	(5	SIGNATURE OF APPLICANT)	
APPROVED BY	FOR	DATE	
DISAPPROVED BY	FOR	DATE	
HOLD PENDING FURTHER TESTS		<u> </u>	
REASONS FOR REJECTION OR HOLDING		<u> </u>	
			· · · · · · · · · · · · · · · · · · ·
PERCOLATION TEST PLAT/PRELIMINARY PLAT - TITLE OR I.I	D. #	DATE	
			**
SITE DEVELOPMENT PLANFINAL PLAT - TITLE OR I.D	· 	DATE	

THIS IS NOT A PERMIT





State Stand

PERMIT APPARAGE (SO)

p34985-

REPAIR

SEWAGE DISPOSAL SYSTEM

MARYLAND STATE DEPARTMENT OF HEALTH'

HOWARD COUNTY

BUREAU OF ENVIRONMENTAL HEALTH 992-2330 ELLICOTT CITY

DISTRICT

DATE 2/13/85

			•
	Arnold Septic Tank Service	IS PERMITTED TO INSTALL	ALTER X
DDRESS	s Road, Mt. Airy, Maryland 21771	RT97 PHONE 795	-7873 -7.00
JBDIVISION	ROAD TOO		3 B R
OPERTY OWNER _	STENT Mr. Walker BUYER		XIST Itou
DRESS	two Gold south	·. H	ouse 5 bedrooms
GARBAGE GRINDE	R IS USED INCREASE SEPTIC TANK CAPACITY BY 50%	AND ABSORPTION AREA BY 22%.	95 of Sept 2000
ARBAGE GRINDER?	YES NO		
PTIC TANK CAPACI	TY GALLONS NUMBER OF BED	PROOMS	
ERCOLATION T	EST TO ESTABLISH SUFFICIENT AREA TO	ALLOW FOR FUTURE REPAIR	RS TO EXISTING
SEPT.	IC SYSTEM.		
Renaumoni	System; 200 \$ /BR; INLET SA	EL BOTTOM 10 Ft; 5	STONE BELOW P.
PLACE SYSTE	M 165 Ft FROM BACK OF 16USE	AND 25Ft From 5260	, RUN SYST.
DON Leve	1 GROUND, 5 Abril 5-6-88 / 5-7	- 86 OK TO BOTTOM AT	10.5' S. Abel
		·	·
	* 	BLDG. PERMIT	SIGNED /
		AND RETURNED	3/2/14 ~
ANS APPROVED BY _	Craig Williams	Comparacy ha	dil) 2/13/85
VER NO WORK UNTIL	INSPECTED AND APPROVED.	,	
THER THE HOWARD	COUNTY COUNCIL NOR THE HEALTH DEPARTMENT IS RESPO	NSIBLE FOR THE SUCCESSFUL OPERATION	OF ANY SYSTEM.
TE: IF TRENCH IS U	SED CALL FOR INSPECTION BEFORE AND AFTER PLACING GR	AVEL IN TRENCH.	
TE: NO DRY WELL	SHALL EXCEED 15 FOOT IN DIAMETER, NO ABSORPTION TREE	NCH TO EXCEED 100 FEET IN LENGTH	,

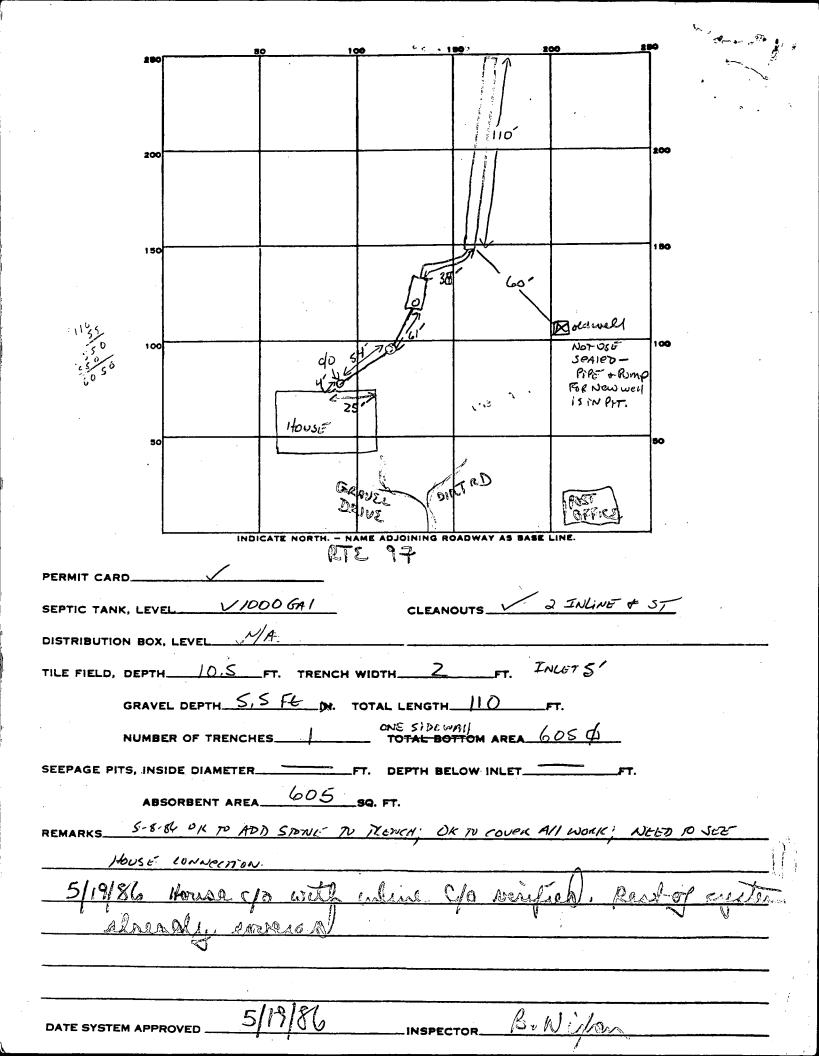
*INSTALLER IS RESPONSIBLE FOR OBTAINING FINAL APROVAL ON THIS PERMIT

NOTE: INSTALL STAND PIPE ON SEPTIC TANK AND DRY WELL. STAND PIPES MUST BE 6 INCHES IN DIAMETER. CAST IRON, CONCRETE OR TERRA COTTA, OR : 🚐

NOTE: ALL PIPE FROM HOUSE TO SEPTIC TANK MUST BE CAST IRON OR SCHEDULE 40 PVC OR ABS.

PVC OR ABS ACCEPTED. IF TOP OF SEPTIC TANK IS DEEPER THAN 3 FEET MANHOLE TO GRADE REQUIRED.

PERMIT VOID AFTER THREE YEARS.



APPLICATION

SEWAGE DISPOSAL TESTING

STATE OF MARYLAND - DEPARTMENT OF HEALTH AND MENTAL HYGIENE

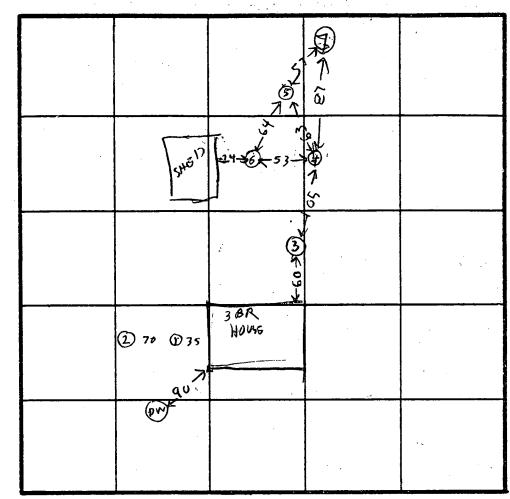
HOWARD COUNTY HEALTH DEPARTMENT

34985

ENVIRONMENTAL HEALTH SERVICES		DISTRICT	
P. O. BOX 476 ELLICOTT CITY, MARYLAND 21043	ρ ,	resent DATE	
TELEPHONE: 992-2330 Buyer		Wher	
Stephen Walker			
	01;	ver Goldsmith	
3420 Shady Lane Glenwood MO 21738	1		
Glenwood MO 21738	L OF	rgwood	
489 4878	Gle	mwood MO 2173	
D: THE COUNTY HEALTH OFFICER ELLICOTT CITY, MARYLAND	.:		
I. HEREBY. APPLY FOR THE NECESSARY TEST IN ORDER TO CO	NSTRUCT (OR RECONSTRUC	T) A CENNACE DIEBOCAL CYCTEM	
	1 1 7-102	TI A SEWAGE DISPOSAL STSTEM.	
ROPERTY OWNER Oliver Cold so	with to	-	
ADDRESS		PHONE	
	0 -		
ROPERTY LOCATION: 5 Walks 0	Buy		
ROPERTY LOCATION: 5 Walker of 3 720 5	budy l	LOT NO.	
DBUIVISION	1	LOT NO	
OAD AND DESCRIPTION			
7		3BK_	
ZE OF LOT		TYPE BLOG EXIST	ING ITOUS
		CNUME	ER OF BEDROOMS)
HE SYSTEM INSTALLED UNDER THIS APPLICATION IS ACCEP	TABLE ONLY UNTIL PUB	LIC FACILITIES BECOME AVAILABL	E. I FULLY UNDERSTAND THE
EE CONNECTED WITH THE FILING OF THIS PERC TEST APPL	ICATION IS NON-REFUND	DABLE UNDER ANY CIRCUMSTANCE	S. I ALSO AGREE TO COMPLY
VITH ALL M.O.S.H.A. REQUIREMENTS IN TESTING THIS LOT			
1		(SIGNATURE OF APPLICANT)	
PPROVED BY	FOR	DATE	
EJECTED BY	FOR	DATE	
OLD PENDING FURTHER TESTS		DATE	•
OLD FENDING FORTHER (ES13		UATE	
EASONS FOR REJECTION OR HOLDING			

THIS IS NOT A PERMIT

SOIL PROFILE



INDICATE NORTH - NAME ADJOINING ROADWAY AS BASE LINE.

DATE	TEST NO.	DEPTH	•	WET		1" DROP		,
UATE	4- S		START	3 4 4	Estan	STOP	TIME	ew 5°C
3/9/95	4 V	13		7 7 7	02. 700	~ ~ ~ /V	(). ().	2_3
7,010 3	55	6	323	350	eitep	in		-7
	S V	13	Louis	OK BE	LOW)	PFY		/
	(,)	8	324	341	341 littleper	406	25	61 -
 	6 >	7	324	341	anase	~		200 HBR
	6V	11/2	LOUIS	015	BULOW	61-7		200 ABR 5 INCET
	50	1-/	3481	357	357	407	10	BOTTOM
	40	8	351	356	356	400	4	10 210
	70	B	353)	402	402	411	9	Filed Joins
	75	131/2	402	417	BELOV	ser GF	7	Jamson .
] .
 								•
				}				

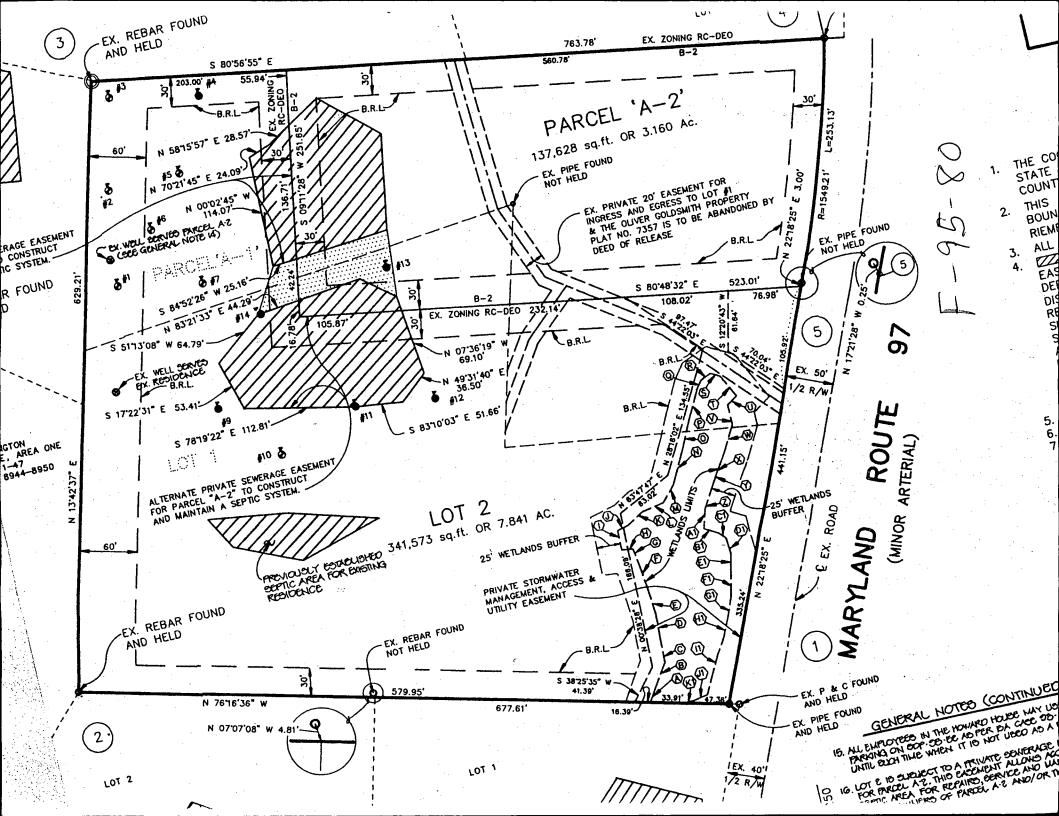
REMARKS	 	 	 		
			•	_	

TESTED BY B 14 ODGGS

_ ALSO PRESENT _ 5. WALKER BUYER

EH-12-1079

Gold Smith owner 3/8/85 Greg & Ray observers
Visval Holer Bustanold
Marpresent



Stephen T. and Brenda Walker

3100 Roxbury Mills Road Glenwood, MD 21738 410-489-4878

November 28, 2000

Mr. Mark E. Rifkin, R.S. Howard County Health Department 3525-H Ellicott Mills Drive Ellicott City, MD 21043-4544

Dear Mr. Rifkin:

In reference to your letter of November 20, 2000 regarding Building Permit Application B00127102, we have engaged the services of Arnold's Backhoe and Septic Service in Woodbine, Maryland. Arnold's is the firm that installed the septic system and they are aware of the concerns about the capacity of the existing septic system and will work with the Howard County Health Department to correct the problem and issues.

If you feel it necessary to schedule a review conference to resolve any additional complexities that may exist, please do not hesitate to contact me.

Sincerely,

Stephen T. Walker

OK BP ISSUED

MD 11/29/00

ten I. Wal

Attachment

Cc: Dynerman & Whitsell Architects



HOWARD COUNTY HEALTH DEPARTMENT

Diane L. Matuszak, M.D., M.P.H., County Health Officer

November 20, 2000

Steve and Brenda Walker 3100 Roxbury Mills Road Glenwood, MD 21738

RE:

Building Permit Application B00127102

3100 Roxbury Mills Road

Proposed Large Addition w/Proposed Bedrooms

Dear Mr. & Mrs. Walker:

This office has received the above referenced building permit application, but cannot recommend approval at this time because of concerns about the capacity of the existing septic system to handle the potential increase in flow associated with this proposal.

The file believed to be associated with your property indicates that a septic system designed for a three-bedroom house was installed in 1986. Therefore, the septic system may not be expected to accommodate the potential increase in sewage flow from the proposed increase in house capacity to six bedrooms.

Additionally, Health Department records for properties in this vicinity seem to be unclear, so the location of any approved septic reserve areas may be in doubt. In order to clarify property records, it is suggested that you or your agent schedule a review conference in this office to resolve any complexities that may exist.

A Health Department recommendation for building permit approval is contingent upon issuance of a septic system repair permit (\$25 fee), and installation of additional septic tank and drainfield capacity. The process is best completed through a professional septic contractor prior to building permit issuance.

Please contact this office at (410) 313-2640 if you have any questions or to arrange permit issuance.

Very Truly Yours,

Mark E. Rifkin, R.S.

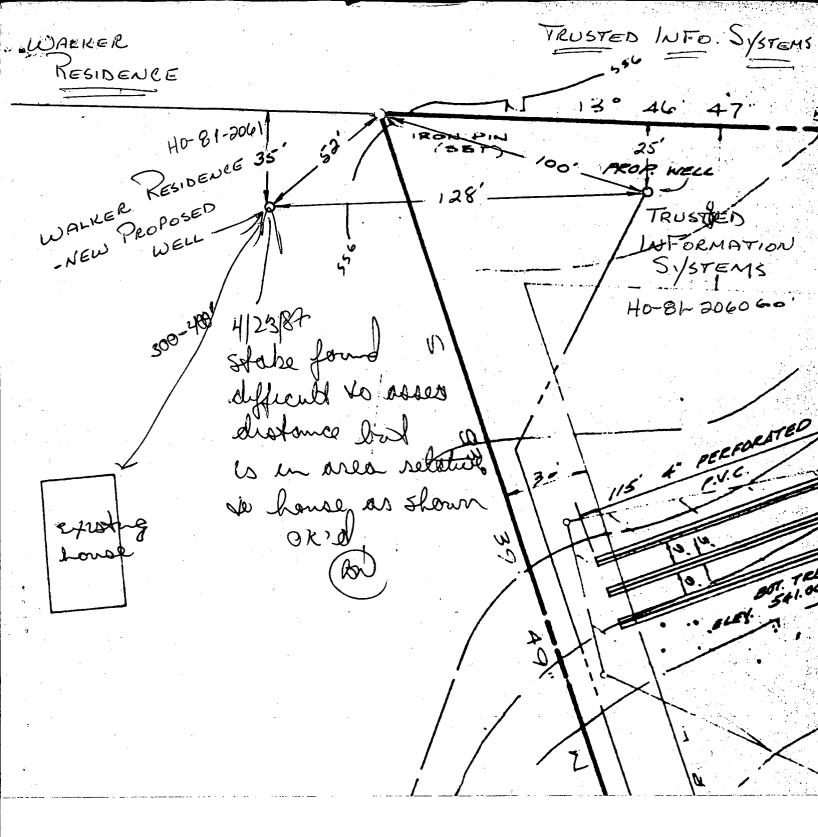
Water & Sewerage Program

MR

cc: Department of Inspections, Licenses & Permits

File

HEALTH

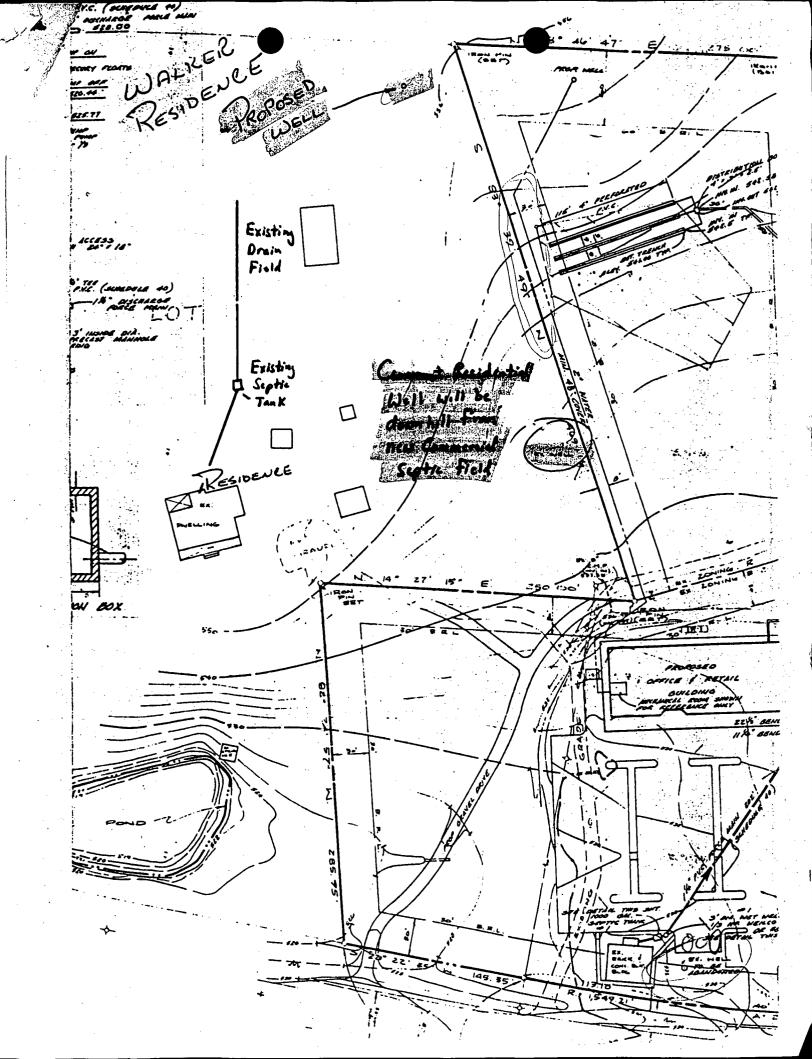


RECEIVED HOWARD COUNT HEALTH DEFT

TPR 13 11 37 AM '87

JANSION OF ELYIRONMENTAL HEALTH

C 1 2411 SEQUENCE NO. (OEP USE ONLY)	STATE OF MARYLAND WELL COMPLETION REPORT	THIS REPORT MUST BE SUBMITTED WITHIN 45 DAYS AFTER WELL IS COMPLETED.
(THIS NUMBER IS TO BE PUNCHED IN COLS. 3-6 ON ALL CARDS)	FILL IN THIS FORM COMPLETELY PLEASE PRINT OR TYPE	COUNTY NUMBER A 39281-W
DATE Received DATE WELL COMPLETE	0	esidence FROM "PERMIT TO DRILL WELL"
DITTE Q93897	22 / 6 0 26	\
OWNER LARLKER	TEPHEN	28 29 30 31 32 33 34 35 36 37
STREET OR RED 35 1000 RTE	NWOTE COMPTENT SAILLY FEE	5LENOUS)
SUBDIVISION MAP 14 PO P.	GROUTING RECORD	LOT
Not required for driven wells STATE THE KIND OF FORMATIONS	WELL HAS BEEN GROUTED (Circle Appropriate Box)	<u>C 3</u>
PENETRATED, THEIR COLOR, DEPTH, THICKNESS AND IF WATER BEARING	TYPE OF GROUTING MATERIAL	HOURS PUMPED (nearest hour)
DESCRIPTION (Use FEET Check if water		PUMPING RATE (gal. per min.
	GALLONS OF WATER 2 25	to nearest gal.) METHOD USED TO
Top Soil 02	DEPTH OF GROUT SEAL (to nearest foot) Afrom (t) ft: to [/ 8] ic ft.	MEASURE PUMPING RATE WATER LEVEL (distance from land surface)
Top Soil 23	48 TOP 52 54 BOTTOM 58 (enter 0 if from surface)	BEFORE PUMPING 40
Shaley 3 10	casing CASING RECORD,	WHEN PUMPING
1 :	insert appropriate STEEL CONCRETE	TYPE OF PUMP USED (for test)
17/10	code PL OT	A air P piston Y T turbine
Mica 22 40,	PLASTIC OTHER	27 27 Oother
Flint 40 42 J	MAIN Nominal diameter ; Total depth CASING top (main) casing of main casing TYPE (nearest inch) (nearest foot)	C centrifugal R rotary (describe 27 below)
Mica 42/10	TYPE (nearest inch) (nearest foot)	J jet S submersible
MICA 110 110 1	60 61 63 64 66 70	
Mica + FLint 110 115	C OTHER CASING (if used) A diameter depth (feet)	PUMP INSTALLED 1
Mixed, 115 160	inch from to	DRILLER WILL INSTALL PUMP YES NO
Mica 13 160	S N	(CIRCLE) (YES or NO) IF DRILLER INSTALLS PUMP, THIS SECTION
	screen type SCREEN RECORD	MUST BE COMPLETED FOR ALL WELLS EXCEPT HOME USE
	or open hole ST BR HO	TYPE OF PUMP INSTALUED PLACE (A,C,J,P,R,S,T,O)
	(appropriate) STEEL BHASS OPEN BRONZE HOLE	IN BOX SEE ABOVE:
	below PLASTIC OTHER	GALLONS PER MINUTE (to nearest gallon)
	C[2]	PUMP HORSE POWER PUMP COLUMN LENGTH
	DEPTH (nearest ft.)	(nearest ft.)
		CASING HEIGHT (circle appropriate box + above and enter casing height)
		LAND SURFÂCE (nearest
CIRCLE APPROPRIATE LETTER	C 23 24 26 30 32 36 R	- below) (mates)
A WELL WAS ABANDONED AND SEALED. WHEN THIS WELL WAS COMPLETED	E 3 38 39 41 45 47 51	LOCATION OF WELL ON LOT
* E ELECTRIC LOG OBTAINED	SLOT SIZE 1 2 31	SHOW PERMANENT STRUCTURE SUCH AS BUILDING, SEPTIC TANKS, AND/OR N LANDMARKS AND INDICATE NOT LESS
P TEST WELL CONVERTED TO PRODUCTION WELL	DIAMETER (NEAREST INCH)	THAN TWO DISTANCES (MEASUREMENTS TO WELL)
THEREBY CERTIFY THAT THIS WELL HAS BEEN CONSTRUCTED IN ACCORDANCE WITH COMAR 10.17.13 "WELL CONSTRUCTION"	from to	U (MESSOTEMENTS TO WEEE)
AND IN CONFORMANCE WITH ALL CONDITIONS STATED IN THE ABOVE CAPTIONED PERMIT. AND THAT THE INFORMATION PRESENTED HEREIN IS ACCURATE AND COMPLETE TO THE BEST	IF WELL DRILLED WAS	well , 3
OF MY KNOWLEDGE	F IN BOX 68 68	X - 15
W. S. C. C.	OEP USE ONLY (NOT TO BE FILLED IN BY DRILLER)	0 /
DRILLERS SIGNATURE (MUST MATCH SIGNATURETON APPLICATION)	T (E.R.O.S.) W Q	7
(MOST MINTOT SQUARTOR CON APPELICATION)	70 72	· / /
SITE SUPERVISOR (sign. of driller or journeyman responsible for sitework if different from permittee)	TELESCOPE LOG OTHER DATA CASING INDICATOR	Wast on
	HEALTH	Was by Killy



		Date	Dec.	6.19	188
Permit Number of abandoned well (if any)		-			
Driller's Name Semmond, Seste Last First	<u>.</u>				
Owner's Name Trusted Info. Last First				; 	
Well Location:	ſ			-	ليسب
County Howard Subdivision Section Lot					·
Nearest Town Address 3060 Washington, Pd			0/5		5/5
Maryland Grid Location E 793 Box Number N 532		×			5.40
		Show wall	0/0 Location by	· (v)	5/0
		within b		(x)	
Type of Well		•		*	
Drilled	·	Log of Sea	ling Materi	al	
Jetted	Materia	1 ខ	Feet From	To	
Bored or Augered	X) V	200	30	5	
Depth of WellFt.	Cen	ent	6		
Type of Casing	Back	kfill	(. :
☐ Plastic ☐ Concrete	·	v			
Other, Specify					
Size of Casing					
Was any case removed no no	•				
If yes amount removedFt.					
Was casing ripped or perforated yes no					
priller Lists Chung		License #	nwh:	307	-
Signature					•

